

## **Analysis on Family Independence Level in the Public Health Nursing at Lawa and Mabodo Primary Health Care in Muna, South East Sulawesi, Indonesia**

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**Abstract:** There is a difference between universal coverage health care of Lawa primary health care (PHC) for maternal mortality rate (MMR=0) and infant mortality rate (IMR=0), in Mabodo health centre with MMR=192,8/100.000 and IMR=16,11/1000). This study aims to analyze the differences between the public health nursing (PHN) activities Lawa and Mabodo PHC and to analyze the differences between the family independence level (FIL) in the PHN activities between Lawa and Mabodo PHC. Methods: The research was quantitative cross-sectional approach, populations were all nurses and families of the working areas of Lawa and Mabodo PHC, sampling by cluster random sampling with nurse samples of Lawa PHC by 8 respondents and 14 respondents of Mabodo PHC, family samples of Lawa PHC by 74 respondents and 65 respondents of Mabodo PHC. Questionnaires were used in the data collection then data were analyzed with the Mann-Whitney test statistic. Results: PHN activity of Lawa PHC with a good category=12.5%, as much as less category=87.5%, PHN activity of Mabodo PHC with good categories=35.7%, as much less category=64.3%. Based on the Mann-Whitney test  $p$ -value = 0.494 was obtained. Family independence level (FIL) at Lawa PHC obtained FIL-I=68.9%, FIL-II=28.4%, FIL-III=1.4% and FIL-IV=1.4%. Family independence level at Mabodo PHC with FIL-I=67.7%, FIL-II=23.1%, FIL-III=7.7% and FIL-IV=1.5%. Based on the Mann-Whitney test differences PHN activities obtained  $p$  value=0.494 and the difference of FIL obtained  $p$  value= 0.692. Conclusion: There is no difference in the implementation of PHN activities between Lawa and Mabodo PHC, and there was no differences in the activities of PHN at Lawa and Mabodo PHC, for FIL as well.

**Key Words:** PHC, PHN, FIL



## **Introduction**

There is a difference between universal coverage health care of Lawa primary health care (PHC) for maternal mortality rate (MMR=0) and infant mortality rate (IMR=0), in Mabodo health centre with MMR=192,8/100.000 and IMR=16,11/1000). The aims of this research are to analyze the differences between the public health nursing (PHN) activities Lawa and Mabodo PHC and to analyze the differences between the family independence level (FIL) in the PHN activities between Lawa and Mabodo PHC.

## **Methods**

This is a quantitative research with cross sectional approach design. Study site are in Lawa primary health care and Mabodo primary health care in Muna, South East Sulawesi, Indonesia. populations were all nurses and families of the working areas of Lawa and Mabodo PHC, sampling by cluster random sampling with nurse samples of Lawa PHC by 8 respondents and 14 respondents of Mabodo PHC, family samples of Lawa PHC by 74 respondents and 65 respondents of Mabodo PHC. Collecting data using questionnaire for primary data. Questionnaires were used in the data collection then data were analyzed with the Mann-Whitney test statistic.

## **Results**

Public Health Nursing (PHN) is an integral part of the service based on the tips, and the science of nursing are integrated with the public health community and support the active role of government support that promotes preventive and promotive services with a particular approach ( Cohen & McKay, 2010 ; Miller, Graves, Jones, & Sievert 2010). Activities role in PHC including Nursing care, Early diagnosis, Health Promotion, Monitoring, Case Referral, and Counselling. Whereas activities role out PHC are Case nursing care, Family nursing care, Spesific group nursing care, and Public health nursing.



Table 1: Frequency Distribution of PHN activity in Mabodo PHC and Lawa PHC in Muna 2014

		Private Health Center				p
No	PHN Activity	Mabodo		Lawa		
		n	%	n	%	
1	Good	5	35.7	1	12.5	0.494
2	Less	9	64.3	7	87.5	
Total		14	100.0	8	100.0	

Source: Primary data

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Family independence level is the ability of family to overcome health family problem as follow:

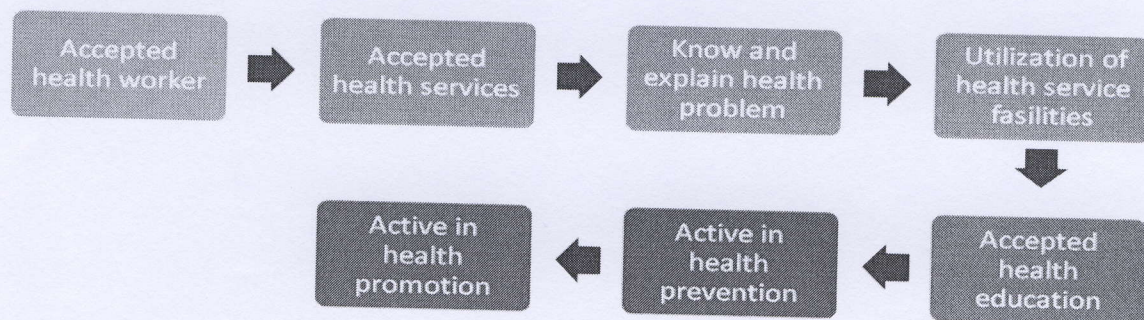


Table 2 : Frequency Distribution of Family Independence Level in Mabodo PHC and Lawa PHC in Muna 2014

No		Family Independence Level (FIL)	PHC				p
			Mabodo		Lawa		
			n	%	n	%	
1	FIL-I	44	67.7	51	68.9	0.692	
2	FIL-II	15	23.1	21	28.4		
3	FIL-III	5	7.7	1	1.4		
4	FIL-IV	1	1.5	1	1.4		
Total		65	100.0	74	100.0		

Source: Primary data



## **Discussion**

Based on the results of the Mann-Whitney test showed that there was no differences in the activities of PHN at Lawa PHC and Mabodo PHC ( $p = 0.494$ ). This means that the activities of PHN at Lawa PHC and Mabodo PHC in Muna both show lack of activities quality in this case is not achieved of PHN activities for the whole society. Nurses have the duty more the outdoor or to the field in this case to find a variety of health-risk cases (Mubarak & Chayatin, 2009).

Families who receive good at the health center nurse visits the City and Rural region is still relatively lacking despite data showing that the health center area of the city received a lower nurse visits. Based on the results of the Mann-Whitney test showed that there is no difference between the Family Independence Level (FIL) in the family of Mabodo PHC and Lawa PHC ( $p = 0.692$ ). This means Family Independence Level (FIL) of Lawa PHC and Mabodo PHC in Muna both show quality is still low means in this case the Family Independence Level (FIL) has not been evenly distributed to all levels of society.

## **Conclusion**

There is no difference in the implementation of PHN activities between Lawa and Mabodo PHC ( $p = 0.494$ ). There is no differences in the Family Independence Level (FIL) in the PHN activities at Lawa PHC and Mabodo PHC ( $p = 0.692$ )

## **Recommendation**

For improving PHN activities, family independence level (FIL), and priority of promotive and preventive need to improve nurses competency both in and outside PHC and nurses competency both in and outside PHC without ignoring curative and rehabilitation aspect.



## Reference:

- Alpi, K. M., & Adams, M. G. (2007). Mapping the Literature of Public Health and Community Nursing. *Journal of Medical Library Association*, 95(91): e96–e99.
- Association, C. P. H. (2010). Community Health Practice in Canada Roles and Activity. *Underwood & Associates and Innovative Solutions – Health Plus*.
- Chang, A. H., Polesky, A. A., & Bhatia, B. G. (2013). House Calls by Community Health Workers and Public Health Nurses to Improve Adherence to Isoniazid Monotherapy for Latent Tuberculosis Infection: a Retrospective Study. *BMC Public Health*.
- Cohen, B. E., & McKay, M. (2010). The Role of Public Health Agencies in Addressing Child and Family Poverty: Public Health Nurses' Perspectives. *The Open Nursing Journal*, 4: 60–71. doi: doi: 10.2174/1874434601004010060.
- Iliffe, S., Drennan, V., Manthorpe, J., Gage, H., Davies, S. L., Massey, H., . . . Claire Goodman. (2011). Nurse Case Management and general Practice: Implications for GP Consortia. *The British Journal of General Practice*, 61(591): e658–e665. doi: doi: 10.3399/bjgp11X601370
- Jayarman, Chandrasekthihar, & Gebreselassie. (2008). actor Affecting Maternal Health Care Seeking Behaviour in Rwanda. *Demographic and Health Research*.
- Kalb, K. A., O'Conner-Von, S. K., Schipper, L. M., Watkins, A. K., & M.Yetter, D. (2012). Educating Leaders in Nursing: Faculty Perspectives. *International Journal of Nursing Education Scholarship, Volume 9*(Issue 1). doi: DOI: 10.1515/1548-923X.2215
- Kamel, & Andersen. (2011). Measurement of Community Empowerment in Three Community Programs in Rapla (Estonia). *International Journal of Environmental Research and Public Health*, 8, 799-817;. doi: 10.3390/ijerph8030799.
- McHugh, G. A., Horne, M., Chalmers, K. I., & Luker, K. A. (2009). Specialist Community Nurses: A Critical Analysis of Their Role in the Management of Long-Term Conditions. *Intenational Journal of Public Health*, 6(10): 2550–2567. doi: 10.3390/ijerph6102550
- Mubarak, W. I., & Chayatin, N. (2009). *Ilmu Keperawatan Komunitas pengantar dan teori*. Jakarta: Salemba Medika.
- Mubarak, W. I., Chayatin, N., & Santoso. (2010). *Ilmu Keperawatan Komunitas Konsep dan Aplikasi*. Jakarta: Salemba Medika.
- Nic, P., Griffiths, Byrne, Horan, Brady, & Begley. (2010). The Role of the Public Health Nurse in a Changing Society. *Journal of Advanced Nursing*, 66(64), 743–752. doi: doi: 10.1111/j.1365-2648.2009.05226.x



- Nigenda, G., Magaña, L., Valladares, Cooper, K., Arturo, J., & Larios, R. (2010). Recent Developments in Public Health Nursing in the Americas. *International Journal of Environmental Research and Public Health*, 7(3): 729–750. doi: 10.3390/ijerph7030729
- Pandey, N. (2013). Perspective on Accessibility of Public Health Facilities in Rural Uttar Pradesh, India *International Journal of Social Science & Interdisciplinary Research* (Vol. 1. 2 (4), APRIL (2013)).
- Rastegari, M., Dehkordi, A. J., Sabouhi, F., & Ghalriz, P. (2010). Assessing the effect of Community Health Nursing Care Management at Home on War-Worn Soldiers' Physical Problems Suffering from Spinal Cord Complications (Urinary Infection, Bedsore). *Iranian Journal Nursing and Midwifery research*, 15(Suppl11): 322–330.